

2003-04 WorkFirst Block Grant

Plan Application

May 2003



Washington State
Board for Community and Technical Colleges
P.O. Box 42495
Olympia, WA 98504-2495

<p style="text-align: center;">PLAN APPLICATION 2003-04 WORKFIRST BLOCK GRANT STATE BOARD FOR COMMUNITY AND TECHNICAL COLLEGES</p>
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For fiscal year 2003-04, community or technical colleges and FY 03 WorkFirst training providers at community based organizations (CBOs) and private colleges will be awarded a WorkFirst Block Grant to provide training services that will:

- Increase the number of TANF adults entering employment with wages better than local ESD average for job placements.
- Increase job placements for TANF ESL and other adults with low basic skills.
- Increase job placements and wage progression for other unemployed¹ and low-income parents.

This application contains the following parts:

Part I – Performance

- Planning Data
- Performance Incentives

Part II – Application Guidelines

Part III – Application Sections and Application Materials

- Planned Services Grid
- Enrollment and Job Placement Projections
- Child Care Enrollment Projections
- Agency Partner Participation
- Budget Matrix
- Employer and Agency Partner Support

Plan Guidance (separate document)

- Budget Guidance and Financial Information
- Guidelines for Coding, Reporting, and Monitoring
- General Student Eligibility Guidelines

¹ Unemployed includes those not working or working less than 20 hours per week when they start training, who enroll for job placement in a better job than they could get without training.

<p style="text-align: center;">PART I – PERFORMANCE 2003-04 WORKFIRST BLOCK GRANT STATE BOARD FOR COMMUNITY AND TECHNICAL COLLEGES</p>
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PLANNING DATA

Applicants should plan sufficient enrollments to place at least as many TANF adults in 2003-04 as in 2002-03. Use the most current CJST/Integrated Basic Skills enrollment data. SBCTC will compare your CJST/Integrated Basic Skills enrollment projections to the final enrollment data as it becomes known in August 2003. SBCTC may negotiate a higher final enrollment target if there is a substantial difference between your projected TANF enrollments for 2003-04 versus your actual enrollments in 2002-03.

PERFORMANCE INCENTIVES FOR FISCAL YEAR 2003-04

SBCTC plans to continue awarding a portion of funding each year based on TANF adults going to work the quarter after training. Because we still lack a full year of program placement data, a portion of performance funding will include TANF enrollments. For 2003-04, the performance criteria will be:

1. 2003-04 actual TANF enrollments in CJST/Integrated Basic Skills – This is compared to the college's final enrollment target. It is also measured separately for share of total TANF Integrated Basic Skills enrollments.
2. 2002-03 share of all TANF placements funded through SBCTC

A system work group will advise SBCTC on the percent of performance weighted to each of the criterion above.

<p>PART II – APPLICATION GUIDELINES 2002-03 WORKFIRST BLOCK GRANT STATE BOARD FOR COMMUNITY AND TECHNICAL COLLEGES</p>
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ELIGIBLE APPLICANTS

Project proposals will be accepted from any of Washington's community or technical colleges and FY 03 WorkFirst training providers at community based organizations (CBOs) and private colleges.

APPLICATION PROCESS

All proposals must be produced on one side of standard 8 1/2" x 11" unruled, white paper. Font size shall be no smaller than 10-point type. Do not include special covers, binders, or lengthy attachments.

Submit an original and five (5) copies by 3 p.m. on Thursday, June 26, 2003, to:

Paula Knittle
State Board for Community and Technical Colleges
319 Seventh Avenue SE; PO Box 42495
Olympia WA 98504-2495

Also submit an electronic version to: pknittle@sbctc.ctc.edu

All proposals must be received by 3 p.m. on Thursday, June 26, 2003. Fax applications will not be accepted. Postmarks will not be accepted.

ADDITIONAL INFORMATION

State Board staff will be available to answer questions about the programs and discuss specific project proposals. For more information about the program or selection process, please contact Robin Thompson at 360-704-4327, or email rthompson@sbctc.ctc.edu.

PART III – PLAN SECTIONS AND APPLICATION MATERIALS
2002-03 WORKFIRST BLOCK GRANT
STATE BOARD FOR COMMUNITY AND TECHNICAL COLLEGES

College/Provider:	
Address:	
Contact Person:	
Phone:	Email:

PLANNED SERVICES GRID
2003-04 WorkFirst Block Grant
(three-page maximum)

Please describe specifically the services and activities you plan to provide in FY 04.

Keeping in mind what you have learned in the first year of the Block Grant, what do you propose to do in the coming year regarding:

Training and Job Placement Activities	Description of Services and Activities (please be specific)
Customized Job Skills/ Integrated Basic Skills Training Individual or group job skills training, employer-driven, targeting better than local ESD average-wage job placements. ABE/ESL/ GED, SCANS skills, life skills, family management, work readiness, taught <u>in conjunction with</u> individual or group technical skills training and attached to an employment opportunity.	
Work-Based Learning/Work-Study Includes WorkFirst work - study, other paid or unpaid work experience, internships, done in conjunction with training (see Plan Guidance document, Appendix C – General Student Eligibility Guidelines)	

Training and Job Placement Activities	Description of Services and Activities (please be specific)
<p>WorkFirst Financial Aid/ Work-based Learning Tuition Assistance Tuition, books, or fee assistance to be used for students (see Plan Guidance document, Appendix C – General Student Eligibility Guidelines)</p>	
<p>Other Basic Skills and/ or Job Skills Training Can include family literacy, educational interviewing, employment skills such as those done in conjunction with job search which can include ABE/ESL/GED, basic computer skills, soft skills, job search competencies, etc.</p>	
<p>Post-Employment Services Can include workplace basic skills or other job skills training, etc.</p>	
<p>Child Care A portion of your Block Grant can be used to facilitate access to child care for WorkFirst training participants. If you intend to offer this service, please describe how it will be used to support your training plan. (See Plan Guidance document, Appendix A – Budget Guidance and Financial Information, for additional information regarding the use of the Block Grant for child care.)</p>	

Training and Job Placement Activities	Description of Services and Activities (please be specific)
Other Services Please describe any other services that you plan to offer this year not specified above.	

ENROLLMENT AND JOB PLACEMENT PROJECTIONS
2003-04 WorkFirst Block Grant

	ENROLLMENT & OUTCOMES*				
	Projected Enrollment for Job Placement Activities		Projected Job Placement First Quarter After Training	Projected Enrollment for Wage Progression (working) Activities	Projected Enrollment for Educational Participation Only **
	TANF	Low Income			
Customized Job Skills/ Integrated Basic Skills Training					
Work-Based Learning/Work-Study					
WorkFirst Financial Aid/ Work-Study Financial Aid					
Other Basic Skills and/or Job Skills					
Post-Employment Services					
TOTAL					
unduplicated # of students for each category					

* TANF and Low-Income participants combined count.

** Educational Participation Only students are those who are in WorkFirst training activities but are not required to work or look for work during the program year, e.g. Pregnancy to Employment clients.

CHILD CARE ENROLLMENT PROJECTIONS
2003-04 WorkFirst Block Grant

If you plan to use the Block Grant for child care, please estimate how many Working Connection Child Care (WCCC) children will be served this year:

	Infants	Toddlers	Preschoolers	School-Age
Number to be served				

AGENCY PARTNER PARTICIPATION 2003-04 WorkFirst Block Grant

Describe who your partners are in the development of your plan and what their specific roles are.

Note: Partners may jointly define the general needs of the caseload. The college is responsible for assessing individual participant needs and designing a service plan to address them. Please include the following partners:

1. DSHS
2. ESD
3. Community Jobs
4. Community-based Organizations (CBOs)
5. Other

REFERRALS

Describe the referral process and the specific number of referrals that the partners commit to provide. Please include the following:

1. DSHS
Referral process:
Number of referrals:
2. ESD
Referral process:
Number of referrals:
3. Community jobs
Referral process:
Number of referrals:
4. Community-based organizations (CBOs)
Referral process:
Number of referrals:
5. Other
Referral process:
Number of referrals:

BUDGET MATRIX

2003-2004 WorkFirst Block Grant

College/Provider:	
Contact Person:	
Phone:	Email:

Objective Number ¹	Proposed Use of the Funds	Fund Code ²	BUDGETED FUNDS ³		
			Direct Services to Students	Direct Program Admin	Tracking & Monitoring
1					
2					
3					
4					
5					
6					
		TOTAL			

Fund Codes by Activity:

1. Customized Job Skills or Integration of Basic Skills with Technical Skills Training
2. Work-based Learning/WorkFirst Work Study
3. Post Employment Services
4. WorkFirst Financial Aid/Work-based Learning Tuition Assistance (WBLT)
5. Other Basic and/or Job Skills Training
6. Child Care

¹ Number the list of services you plan to offer, from 1 up to 6.

² One fund code per objective number according to the Fund Codes by Activities list above.

³ Refer to page A-1 of the Plan Guidance document to determine how funds should be split between direct services to students, direct program administration, and tracking and monitoring.

EMPLOYER AND AGENCY PARTNER SUPPORT
2003-04 WorkFirst Block Grant

College/Provider:	
Contact Person:	Phone:
Signature of College/Institution President (or designee):	

By the signatures placed below, we acknowledge that we have been actively involved in developing this plan and will work with the college to implement it.

Customized Job Skills/Integrated Basic Skills Training Employers: at least one representative employer for each occupational track

Business Partner _____
Name _____
Signature _____

Business Partner _____
Name _____
Signature _____

Business Partner _____
Name _____
Signature _____

Business Partner _____
Name _____
Signature _____

Business Partner _____
Name _____
Signature _____

Business Partner _____
Name _____
Signature _____

DSHS

Name _____
Signature _____

Employment Security

Name _____
Signature _____

Community Jobs (optional)

Name _____
Signature _____

WDC/WorkSource (optional)

Name _____
Signature _____

Other

Organization _____
Name _____
Signature _____

Other

Organization _____
Name _____
Signature _____